



Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/768,886
Filing Date	JANUARY 31, 2004
First Named Inventor	YIONG YANG
Title	MITOGEN-ACTIVATED PROTEIN KIN
Group Art Unit	TO BE ASSIGNED
Examiner Name	TO BE ASSIGNED
Attorney Docket Number	UAF-03-14

I hereby appoint:

☐ Practitioners at Customer Number **OR**

☒ Practitioner(s) named below:

Place Customer
Number Bar Code
Label here

Name	Registration Number
ANGELA FOSTER	48,494

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

OR

Place Customer
Number Bar Code
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	ANGELA FOSTER, PHD., ESQ.				
Address					
Address					
City	NORTH BRUNSWICK	State	NJ	Zip	08902-3933
Country	USA				
Telephone	732-821-9363	Fax	732-821-4692		

I am the:

☐ Applicant/Inventor.

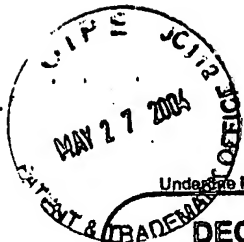
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	ANN KEMP
Signature	
Date	4/21/04

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.



PTO/SB/01 (08-03)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐Declaration
Submitted
With Initial
Filing

OR

☒Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	UAF-03-14
First Named Inventor	Yang, Yinong
COMPLETE IF KNOWN	
Application Number	10/768,886
Filing Date	January 31, 2004
Art Unit	To be Assign
Examiner Name	To be Assign

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**MITOGEN-ACTIVATED KINASE PROTEIN AND METHOD OF USE TO ENHANCE ABIOTIC
AND BIOTIC STRESS TOLERANCE IN PLANTS**

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☐

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		Yes	No
			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

☒ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number: OR ☒ Correspondence address below

Name

Angela Foster

Address

2906 Birchwood Court

City

North Brunswick

State

New Jersey

ZIP

08902-3933

Country

USA

Telephone

732-821-9363

Fax

732-821-4692

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Yinong

Family Name

or Surname Yang

Inventor's
Signature

Date

4/20/2004

Residence: City

Fayetteville

State

Arkansas

Country

USA

Citizenship

USA

Mailing Address

1801 N. Glenbrook Place

City

Fayetteville

State

Arkansas

ZIP

72701

Country

USA

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Lizhong

Family Name

or Surname Xiong

Inventor's
Signature

Date

Residence: City

Wuhan

State

Hubei

Country

China

Citizenship

P.R. China

Mailing Address

11-23-6, Lion Hill Third, Huazhong Agricultural Univeristy

City

Wuhan

State

Hubei

ZIP

430070

Country

China

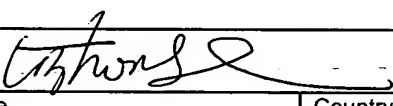


Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

RECEIVED
APR - 7 2004
RSSP

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number: <input type="text"/>				OR <input checked="" type="checkbox"/> Correspondence address below	
Name Angela Foster					
Address 2906 Birchwood Court					
City North Brunswick		State New Jersey		ZIP 08902-3933	
Country USA		Telephone 732-821-9363		Fax 732-821-4692	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Yinong			Family Name or Surname Yang		
Inventor's Signature				Date	
Residence: City Fayetteville		State Arkansas		Country USA	
Citizenship USA					
Mailing Address 1801 N. Glenbrook Place					
City Fayetteville		State Arkansas		ZIP 72701	
Country USA					
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Lizhong			Family Name or Surname Xiong		
Inventor's Signature 				Date 04/22/2004	
Residence: City Wuhan		State Hubei		Country China	
Citizenship P.R. China					
Mailing Address 11-23-6, Lion Hill Third, Huazhong Agricultural Univeristy					
City Wuhan		State Hubei		ZIP 430070	
Country China					
<input type="checkbox"/> Additional inventors or a legal representative are being named on the _____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					